Debtor 1	Ronnie	Stanley	Fiel
200101	First Name	Middle Name	Last Name
Debtor 2	Sarah	Tiffany	Fiel
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Case number	Bankruptcy Court for the: 19-2092-jwb	Western District of M	lichigan

Amended where indicated-by asterisk

Check if this is an amended filing

## Official Form 106A/B

## Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

No. Go to Part 2. Yes. Where is the property?  1.	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on <i>Schedule D:</i>
Street address, if available, or other description	Condominium or cooperative  Manufactured or mobile home  Land Investment property	Current value of the entire property?	Current value of th portion you own?
City State ZIP Code	Timeshare Other	Describe the nature of interest (such as feet the entireties, or a life	simple, tenancy by
County	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:		mmunity property
ou own or have more than one, list here:	What is the property? Check all that apply.  ☐ Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
2. Street address if available or other description	Duplex or multi-unit building	Oreanors willo mave claim	ns secured by Property.
Street address, if available, or other description	<ul><li>Condominium or cooperative</li><li>Manufactured or mobile home</li></ul>	Current value of the entire property?	
Street address, if available, or other description  City State ZIP Code	Condominium or cooperative	Current value of the	Current value of th portion you own? \$
Street address, if available, or other description	<ul> <li>□ Condominium or cooperative</li> <li>□ Manufactured or mobile home</li> <li>□ Land</li> <li>□ Investment property</li> <li>□ Timeshare</li> </ul>	Current value of the entire property?  \$  Describe the nature of interest (such as fee	Current value of the portion you own?  \$

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Debtor 1		Stanley le Name Last Name	FIEI Case number (##	nown) 19-2092	
1.3.	First Name Mildd		What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?  \$  Describe the nature of interest (such as feethe entireties, or a life	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$  of your ownership simple, tenancy by
	County		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this its property identification number:	Check if this is co (see instructions) em, such as local	mmunity property
you own		gal or equitable intereses. If you lease a vehicle	st in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts , motorcycles		s
□ N ☑ Y	- <del>-</del>				
3.1.	Make: Model: Year: Approximate mileage: Other information: debtor 1 and dau	Ford Escort 2001 200000 ghter own	Who has an interest in the property? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 2,000.00	d claims on Schedule D:
lf you	ı own or have more than	one, describe here:			
3.2.	Make: Model: Year: Approximate mileage:	Ford Escape 2002 130000	Who has an interest in the property? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on <i>Schedule D:</i>
	Other information:		☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00

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Debtor 1	Ronnie First Name Middle Name	Stanley Last Name	Fiel	Case number (if kn	own) 19-2092	· · · · · · · · · · · · · · · · · · ·
	riist Name Miliade Name	Last Name				
3.3.	Make:		Who has an interest in t	he property? Check one.	Do not deduct secured cla	ims or exemptions. Put
0.0.	Model:		Debtor 1 only		the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
	Year:		Debtor 2 only			,
	Approximate mileage:		Debtor 1 and Debtor 2 o	•	Current value of the entire property?	Current value of the portion you own?
		<del></del>	At least one of the debte	ors and another		
	Other information:		☐ Check if this is comminstructions)	nunity property (see	\$	\$
0.4	Make:		Who has an interest in t	he property? Check one.	Do not deduct secured cla	ime or exemptions. But
3.4.			Debtor 1 only	no proposty remaine	the amount of any secured	d claims on <i>Schedule D:</i>
	Model:		Debtor 2 only		Creditors Who Have Clain	ns Secured by Property.
	Year:		Debtor 1 and Debtor 2 of	only	Current value of the	Current value of the
	Approximate mileage:		At least one of the debte	ors and another	entire property?	portion you own?
	Other information:				ф	Φ
			☐ Check if this is comminstructions)	nunity property (see	Ф	\$
			modulomoj			
4.1.	Make:	_	Who has an interest in the	ne property? Check one.	Do not deduct secured cla	
	Model:		Debtor 1 only		the amount of any secured Creditors Who Have Clain	
	Year:		Debtor 2 only			
	Other information:	***************************************	Debtor 1 and Debtor 2 o  At least one of the debto	•	Current value of the entire property?	Current value of the portion you own?
			Check if this is comminstructions)	nunity property (see	\$	\$
If you	own or have more than one,	list here:				
4.2.	Make:		Who has an interest in the	ne property? Check one.	Do not deduct secured cla	
• • •	Model:		Debtor 1 only		the amount of any secured Creditors Who Have Clain	
	Year:	_	Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 o		entire property?	portion you own?
	Other mormation.		At least one of the debto	ers and another		
			Check if this is comminstructions)	nunity property (see	\$	\$
	Lucium martin ma					
					ı	
	the dollar value of the portionave attached for Part 2. Wri	-	-	t 2, including any entries	for pages	\$4,000.00

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Debtor 1

Ronnie

Stanley

Fiel

Case number (if known) 19-2092

Part 3:

Describe Your Personal and Household Items

Do	you own or have any	legal or equitable interest in any of the following items?	Current va portion yo Do not dedu or exemption	u own? ct secured claims
6.	Household goods and	furnishings		
	Examples: Major applia	nces, furniture, linens, china, kitchenware		
	No Yes. Describe	Normal household items	\$	4,000.00
	<u>.</u>			
7.	collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	☐ No ☐ Yes. Describe	Three televisions,two cell phones	\$	1,000.00
8.	stamp, coin,	d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	No Yes. Describe		\$	
	and kayaks;	and hobbies ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	assier er om a så	
	No Yes. Describe	Kids bikes,toys,handtools	\$	200.00
	Firearms  Examples: Pistols, rifles  ✓ No  ☐ Yes. Describe	, shotguns, ammunition, and related equipment	\$	
	☐ No	thes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe	Everyday clothes	\$	500.00
	Jewelry Examples: Everyday jew gold, silver  No	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	Yes. Describe	wedding ring	\$	1,500.00
	Non-farm animals Examples: Dogs, cats, b	oirds, horses		
	☑ No ☐ Yes. Describe		\$	
		household items you did not already list, including any health aids you did not list		
	✓ No ✓ Yes. Give specific information		\$	
	Add the dollar value of	all of your entries from Part 3, including any entries for pages you have attached	\$	7,200.00
	ioi i ait o. wille that lit	mider fiele	` L	

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Debtor 1

Ronnie First Name

Stanley

Last Name

Middle Name

Fiel

Case number (if known)\_

19-2092

Part 4:	Describe	Your	Financial	As

Do you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own?  Do not deduct secured claim or exemptions.
16. <b>Cash</b> <i>Examples:</i> Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file yo	ur petition
☐ Ņo ☑ Yes		Cash	s <u>50.00</u>
		unts; certificates of deposit; shares in credit unions, brokultiple accounts with the same institution, list each.	kerage houses,
☐ No ☑ Yes			
Yes		Institution name:	
	17.1. Checking account:		\$
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		\$
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:	Walmart Reloadable prepaid card	\$ 7.39
	17.7. Other financial account:		**************************************
	17.8. Other financial account:		\$
	17.9. Other financial account:		Ψ
•			
•	or publicly traded stocks investment accounts with brok	erage firms, money market accounts	
☐ Yes	Institution or issuer name:		
			\$
			\$
			<u> </u>
19. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including an	ı interest in
☑ No	Name of entity:		ownership:
Yes. Give specific information about		0%	
them		0%	
		0%	<u> </u>

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Debtor 1	Ronnie First Name	Stanley  Middle Name La	Fiel Fiel	Case number (#known)_	19-2092		
o Gove	rnment and corne	orata hands and athe	er negotiable and non-nego	ntiable instruments			
Nego	tiable instruments i	nclude personal checi	ks, cashiers' checks, promis	sory notes, and money orders.			
		ents are those you can	not transfer to someone by	signing or delivering them.			
	o es. Give specific formation about	Issuer name:				œ.	
th	em					Ф	
		-		***************************************		\$	
	ement or pension		4/k\ 402/h\ thrift payings o	ccounts, or other pension or profit-sh	arina nlane		
□ N		VA, ENISA, Keogii, 40	(K), 403(D), tillit savings a	counts, or other pension or profit-si	iating plans		
<b>2</b> Ye	es. List each						
ac	ccount separately.	Type of account:	Institution name:	\ <del>T</del>			0.500.04
		401(k) or similar plan:	Munson 401(k) 403(b	) I ransamerica		\$	3,538.34
		Pension plan:				\$	
		IRA:				\$	<del></del>
		Retirement account:				\$	
		Keogh:				\$	
		Additional account:				\$	
		Additional account:				\$	
Your s Exam compa	ples: Agreements vanies, or others	deposits you have m		e service or use from a company c, gas, water), telecommunications			
<b>2</b> Ye	es	ins	titution name or individual:				
		Electric:				\$	
		Gas: Heating oil:				\$	
			tal unit: Landlord Patsy F	agen		\$	1,900.00
		Prepaid rent:				Φ	<u> </u>
		Telephone:				Ψ \$	
		Water:				\$	
		Rented furniture:					
		Other:				\$	
	•	r a periodic payment c	of money to you, either for life	e or for a number of years)			
Ø N	o es	loguer pages and division	orintian.				
<b>—</b> 16	oo	Issuer name and desc	ырдоп. 			\$	
						\$	
						œ.	

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Debtor 1	Ronnie First Name	Star	Iley Last Name	Fiel	Case number (if known	19-2092	
	i iid iyaiiie	Mindio Hallio	East Name				
		ion IRA, in an acco		alified ABLE program	n, or under a qualified state tu	ition program.	
<b>20</b> 0.0.	O. 33 000(b)(1),	020 ((5), and 020(	<b>υ</b> /( ' /·				
Yes	·,	Institution i	name and de	scription. Separately	file the records of any interests.	1 U.S.C. § 521(c)	:
					······································	<b>.</b> . ,	<b>e</b>
							Φ
		-					Φ
							Ψ
	equitable or fu sable for your b		roperty (oth	er than anything list	ted in line 1), and rights or pov	vers	
No		government of the control of the con	************************************	**************************************	1797911180000000000000000000000000000000		1
	s. Give specific rmation about th	nom.					\$
IIIIO	imation about ii	IGIII	***************************************		AMARAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	pary prayang yang si cesa kalassasa kanassasa (kanas noonen noonen noonen 1909).	Ι Ψ
				other intellectual pr			
	les: Internet dom	nain names, website	es, proceeds	from royalties and lic	ensing agreements		
☑ No			1 CONTROL OF THE PARTY OF THE P	***************************************	144150000000000000000000000000000000000	00-10-41-43-644-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-	]
	s. Give specific rmation about th	nem					\$
		<b></b>	***************************************	CONTROL DE LA CONTROL DE L	ana nakasanaa akki kaski ki dalalaka kaski kaski kaski kaski kaski k. Namboo kaski koski koski koski kaski kas	yyynying, agamalas assasso soosaa soogyeesso soosaan eestaan eestaa	
		and other general					
•	les: Building per	mits, exclusive lice	nses, cooper	ative association hold	lings, liquor licenses, profession	al licenses	
☑ No		go-execuses-district-conden-series-conditioner-release	Makamatan Kasa Addisa san ing akangsa di di Makasa di di Makasa di Makasa di Makasa di Makasa di Makasa di Maka	MICH 45555FTM: Administration confidences, surpresentation confidences energy and confidences	CRECONOCCE LEDICENSIANE COCCUS (I) . LONGITURAN COLLAND SUSCESSARIOS COSTOS CONTROL CONTROL CONTROL CONTROL CO	9940-968771 - 1400-7988-94990/go-man.ius - 48846-9486/8488-96274000 '4000	1
	s. Give specific rmation about th	nem					\$
		appropriate to the second deposits and deposits and	na. Pin i ilgalitya dali ripopia, je i generalitaranjiri kyri i ipi i ildalish da	oder delikusika gli dynaki gidi sida ikraya y vyydiny yyyyyyy angos postowyga voga a baryangy gygo		81 SECSECULARES SERVIS SECSECULARES SECULARES SECURARES SECULARES SECULARES SECULARES SECURARES SECULARES SECURARES	J
loney or	property owed	to you?					Current value of the portion you own? Do not deduct secured
							claims or exemptions.
	unds owed to y	ou					
<b>☑</b> No			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************		
☐ Yes	s. Give specific in about them, in	nformation cluding whether			Fee	ieral:	<b>5</b>
	you already file	ed the returns			Sta	te:	<b>5</b>
	and the tax ye	ars			Loc	eal:	<b>5</b>
					353445 5944449 35445344 444454 3447 - 4597400000000000000000000000000000000000		
9. Family		Lucan auma alimanu	anaugal aug	nort abild ourseart re	aintananaa diyaraa aattlamaat	nronorty softlamor	nt.
<i>Exampl</i> ✓ No	es: Past due or	iump sum ailmony,	spousai sup	port, chiia support, m	aintenance, divorce settlement,	property settlerner	ц
	Civo oposifia ir	nformation		eldella alli delle delle delle la commentant delle la commentant delle la commentant delle la commentant delle			
La res	s. Give specific ii	mormadon			Alim	iony:	\$
					Mai	ntenance:	\$
					Sup	port:	\$
					Dive	orce settlement:	\$
					Pro	perty settlement:	\$
	amounts somed les: Unpaid wag Social Secu	es, disability insura	nce paymen	is, disability benefits, nade to someone else	sick pay, vacation pay, workers	' compensation,	
☐ No	_ 55.5. 5500	y = =::onio; anpan					
	s. Give specific i	nformation	Wages o	arned but not yet	naid		1 600 0
	•		wayes e	arned but not yet	paid		1,600.00

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19-2092

Case number (if known)\_

Fiel

	First Name	Middle Name	Last Name				
31.	Interests in insurance	policies			•		
		-	e; health savings account (H	SA); credit, homeov	ner's, or renter's insurance		
	☑ No						
	Yes. Name the insur of each policy a	rance company and list its value	Company name:		Beneficiary:	Surrender or refund value:	
						\$	
						\$	
						\$	
						Υ	
32.	If you are the beneficiary property because some	y of a living trust, e	rom someone who has died pect proceeds from a life inst		e currently entitled to receive		
	No .	1				<b>-1</b>	
	Yes. Give specific in	formation				\$	
			e same de la company de la	**************************************	ida. Elikono assar in elikusia (laki kada kida kida kida ka alah assa kida kida kida ka angan kida kida kida k I		
33.	Examples: Accidents, er		not you have filed a lawsuit , insurance claims, or rights t		d for payment		
	No No	ī	n - n 1933 de response compositorem 7,00° / 3,550 de responso ( ) de responso de la socio de la socio de la soci	9704W19733994F13H-4041W46039WF1477F3#704804FF17;4FP777337	07 17. MO TO		
	Yes. Describe each	claim				\$	
	<b>.</b>				3800 N 1801 1802 1802 1803 1804 1804 1804 1804 1804 1804 1804 1804	Ψ	_
34.	to set off claims  No	inliquidated claim	s of every nature, including	counterclaims of	the debtor and rights		
	Yes. Describe each	claim	80480-14-19-9-4893-17-4-1888-19-4-1999-4-1-2-3-18-18-19-3-3-3-3-18-18-18-18-18-18-18-18-18-18-18-18-18-	ar-vyskiegy,gyppiyyyyggiggiggiggiga. Tang-vyski sastenyy-vyyvi i prygjagygaa	50-293-3935-394-394-394-395-395-395-395-394-444-7-544-445-7-7-5-1-1-5435-4854-395-1-97-1-48-1-48-1-48-1-48-1		
			нько-м ж. гологонизминастичных розгонны-нь мен-менентий жилимический менениями и пете	***************************************	**************************************	\$	-
35.	Any financial assets you No  Yes. Give specific in		Jarnished wages being	returned as avo	idable preference	\$920.22	-
			from Part 4, including any			s 8,015.95	_
	101 Fait 4. Write that in	amber nere		••••••		Ψ	_
Pa	rt 5: Describe A	ny Business-F	elated Property You	Own or Have a	an Interest In. List any re	eal estate in Part 1.	
27	Do you own or have an	v logal or oquitab	e interest in any business-ı	rolated property?	and the second s		_
31.	No. Go to Part 6.	ly legal of equitab	e interest in any business-i	related property :			
	Yes. Go to Part 6.						
	Yes. Go to line 38.						
						Current value of the portion you own?  Do not deduct secured claims or exemptions.	;
20	Accounts receivable or	oommississs	a already carned			•	
აგ.	Accounts receivable or  No	commissions yo	aneauy earneu				
	formin.	.vij., namidės pas lappses (gydėpiljana launius, avap paspėd, lapas vidas inchendida	Jugis die laggieus syddendamani vorm Edde nad Heide Heide Heide Hiele Scher Mile Scher Mile 2 veredie dat deutsche Mass	e dense pretendant post o commencia de la cuido en mancia de appenada com como es	naceced bedaute a secretar de natura el controlección y sels forma hano con-secretar des a secretar de controlección de la con	1	
	☐ Yes. Describe					\$	_
00	Office construct of				тараараараараараараараараараараараараара	.1	
<i>3</i> 9.	Office equipment, furn Examples: Business-related	• .		nachines, rugs, telepho	nes, desks, chairs, electronic devices		
	□ No						
	☐ Yes. Describe		A CONTRACTOR OF THE CONTRACTOR	200012		\$	
	i					,	_

Ronnie

Debtor 1

Stanley

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Debtor 1	Ronnie	Stanley	Fiel	Case number (if known) 19-2092	
	First Name	Middle Name Last Name			
40. Machine	ery, fixtures, e	quipment, supplies you use in	business, and tool	s of your trade	
☐ No	_		·	•	
	. Describe	ana matangan pada ini ini mangangangan mangangan katangan katangan pagangan dagangan paggangan paggangan bangg	***************************************	***************************************	
u res	. Describe				\$
	l	**************************************	***************************************		
41. Invento	rv				
☐ No	- <b>,</b>	nnistantinensistä 198000000000000000000000000000000000000	v: 1-de-2010-1-4-de-2010-1-4-de-2010-1-4-de-2010-1-4-de-2010-1-4-de-2010-1-4-de-2010-1-4-de-2010-1-4-de-2010-1	tuntan manung mang pagalan hilakan kelakan kelakan kelakan dan dan dan dan dan dan dan dan dan d	mines
	. Describe				\$
	Ĺ	<del></del>	***************************************		
	s in partnersh	ips or joint ventures			
☐ No					
	. Describe	Name of entity:		% of ownership:	
					\$
					\$
				<u> </u>	\$
					Ψ
43 Custom	er lists. mailin	ng lists, or other compilations			
☐ No	,,	g note, or onto compliancing			
	. Do your lists	include personally identifiable	information (as de	fined in 11 U.S.C. § 101(41A))?	
	□ No	•	`	<b>5</b> ( "/	
	Yes. Desc	ribe	***************************************		
	- 100. 2000				\$
		Audi 5550 (Grand State More and State Tool y no. 170, conductive on the state authorized and a face access	kiddiki indimisimeş asındad ad dönləp işi nöyyüdün nik nəyy nayyyın nevyyaysın dönyydin anı	epidapaj producije alvernicim iliainom aliainom iliainom iliainom iliainom iliainom iliainom iliainom iliainom	m. (200
	siness-related	property you did not already li	ist		
☐ No					
	. Give specific				\$
infor	mation				
			-		\$
					\$ <u> </u>
					\$
,					
					\$
					\$
45. Add the	dollar value o	of all of your entries from Part	5. including any ent	tries for pages you have attached	
					\$
Dout G	Dogovika Ar	my Form and Commercial	Fishing Deleted F	Duranti Vari Orini ay Haria ay Intaysat I	_
Part 6:		ny rarm- and commercial i have an interest in farmland,		Property You Own or Have an Interest I	П
	, ,	,			
46 <b>Do yo</b> u	own or have a	ny logal or equitable interest i	n any farm- or com	mercial fishing-related property?	•
	Go to Part 7.	my legal of equitable interest i	if any fairin- or come	merciai namng-related property:	
	Go to line 47.				
30.					Commont colors of the
					Current value of the portion you own?
					Do not deduct secured claims
_					or exemptions.
47 Farm ar					
Example	es: Livestock, p	oultry, farm-raised fish			
☐ No				•	
Yes		Latera de Materia. En esta dels dels dels dels metros de la mente de la companya del la companya de la companya	***************************************	entrans territorioginal resistante de la description de la descrip	9000 P 1919
					\$

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Debtor 1	Ronnie		Stanley	Fiel	_ (	Case number (if known)	19-2092		
	First Name	Middle Name	Last Name						
48. <b>Crops</b> -	either growing	or harvested	1						
☐ No	s. Give specific		31 (486) F 30 F 30 F 30 F 30 F 40 F 30 F 30 F 30	00 Mai + 1, 4 A 2 2 - A 2 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C	r oppgen person serven pri per nom men oppgen men sekr Addick sek et klede ek til ble ble ble ble ble ble ble b				
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